

## Opportunity Funding for Mental Health Services

For more information and to submit applications:

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Funding Period: Fiscal Year 2022

### Delaware Department of Education Opportunity Funding Form 2021-2022 School Year

Application deadline: Friday, July 30, 2021

Purpose: The Opportunity Funding directed to mental health services provides \$5.0 million in FY20, \$2.5 million in HB 225 (Annual Appropriations Act) and \$2.5 million authorized in HB 226 (One-Time Supplemental). With a total supplemental amount of \$7.5 million over three years, the total amount will be \$15 million contingent on future appropriations. The Opportunity Fund is to provide additional funding for English Learner (EL) and low-income students.

For FY21, \$2.5 million is appropriated through HB 240 (Annual Appropriations Act). The guiding language regarding these funds and eligibility was amended through HB260 (Grants- In-Ald Act). The \$2.5 million allocated is supplemented with the \$2.5 million from HB 226 as referenced above. A total of \$5 million is appropriated for FY21.

For FY22, \$5.5 million is appropriated through HB 250 (Annual Appropriations Act). The \$5.5 million allocated is supplemented with the \$2.5 million as referenced above. A total of \$8 million is appropriated for FY22.

For FY22, these funds are apportioned and allocated to schools meeting criteria based on the prior year unit count: 1) a grade configuration containing K through 4<sup>th</sup> grade and (2) greater than or equal to 30% percent low-income and/or greater than or equal to 10% English Learner enrollment. There are schools that have been grandfathered because of meeting the threshold in FY21 and not meeting in FY22. This is noted.

This funding shall be used by school districts and charter schools for *mental health services* in the form of school counselors, school social workers or licensed clinical social workers, school psychologists, and/or for additional reading supports for grades K-5. Services may include the employment of staff, where such funding may be used to cover 100 percent of personnel costs on a 10 to 12-month basis and/or contracted services.

Allocation Method: Amounts vary per school and that amount is indicated below. Each LEA has already received the first half of the funding; the second amount will be released upon receipt and approval of this application.

DISTRICT/CHARTER NAME: Red Clay Consolidated School District / Baltz (Austin D.) Elementary School
ADDRESS: 1500 Spruce Avenue, Wilmington, DE 19805
CONTACT NAME: Arny O'Neill
contact phone: 302-992-5560
contact email: amy.oneill@redclay.k12.de.us
ALLOCATION AMOUNT: \$141,106

### Questions:

What mental health needs of your identified low-income and English learner students
will you be addressing through these mental health services funds? (Please Indicate
N/A if these funds are solely being used for reading supports for the two subgroups – EL
and low-income.)

The addition of a school psychologist will enable us to provide additional small group counseling interventions as well as individual counseling supports and behavioral interventions as part of our Multi-tiered System of Supports. The school psychologist will support students who are low-income or English learners who have the need for tier 2 or 3 mental or behavioral health supports. Red Clay school psychologists follow the National Association of School Psychologist (NASP) Practice Model which provides both direct student interventions as well as indirect services such as consultation and collaboration with outside providers and family-based therapies.

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English	u using these funds for reading supports for your identified low-income and learner students in addition to mental health services or in lieu of mental services? If so, what types of supports/services will be provided?	
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4. How will you know if these services or supports are effective?

### Assurances and signatures:

Signature:\_\_\_\_\_

As the chief school officer of the district or school, including the indicated school, I am authorized to submit for the funds identified in this form. I am also authorized to obligate the district or charter school to conduct any activity approved under this form in accordance with all applicable state requirements, including statutory and regulatory requirements, and program specific requirements. The information contained in it is true and correct to the best of by knowledge and belief. By submitting this form, I acknowledge that I understand and agree to abide by all applicable requirements. I further agree that

- 1. I understand that this funding may not be used to supplant otherwise available funding.
- 2. I understand that our district shall be authorized to assess a local match to provide for the local contribution of personnel costs associated with this appropriation (districts only).

Chief	School Officer (printed name	•
Signat	ture:	Date:
submi contai knowl this fo	it for the funds identified in t ined in this form. The informa edge and belief. I have revie	crict or school, including the indicated school, I am authorized to his form. I have read this form and reviewed the financial information tion contained in this form is true and correct to the best of my wed and approve the submission of the budgetary information for acknowledge that I understand and agree to abide by all applicable
1. 2.	I understand that our distr	ng may not be used to supplant otherwise available funding. It shall be authorized to assess a local match to provide for the local osts associated with this appropriation (districts only).
Busine	ess manager (printed name):	
Signat	ure:	Date:
By sigr	ning this form, I am approvin	the plan submitted by the district or charter.
Secret	ary of Education/Designee (	rinted name):

Live signature on file at DOE.

Date: \_\_\_\_



SALARY AND DEC TOTAL:

### State of Delaware **Department of Education** State Funds Budget Form

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TOTAL SUPPLIES AND MATERIALS COSTS

### State of Delaware Department of Education State Funds Budget Form

State Subgrant:	Opportunity Grant N	letal Health		Project Start Date:		
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LEA/Agency:	Red Clay	AND	enge	Project End Date:	**************************************	Special Control of the Control of th
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### DEPARTMENT OF EDUCATION STATE OF DELAWARE

# BUDGET SUMMARY OF STATE FUNDS

LEA/Agency Name:

Red Clay

State Subgrant Title:

Opportunity Crant Metal Health

Project Title: Balt

Account Code	2100	5130	2400	2300	2600	5760	1210 Z
Account Code Name	Salaries	OECIs	Travel	Contracted Services	Supplies & Materials	Capital Outlay	Budger
Total Budget	293,000.00	\$48,106.00					20 206 1180

Completed By:

Date:

Date:

Chief Financial Officer or Business Manager: